UNITED STATES DISTRICT COURT EASTERN DISTRICT OF TENNESSEE AT

FILED

2020 FEB 26 P 12: 25

Gabrie	1 Xavier	U.S. DISTRICT COURT ASTERN DIST. TENN.
Collins		DEPT. CLERK
(Enter above plaintiff in t	the NAME of the this action.)	
Sevier Sherr	- County;	
	the NAME of each this action.)	
i. PREVI	COMPLAINT FOR VIOLATION OF CIVIL RIGHTS (42 U.S.C. Section 1983) IOUS LAWSUITS	•
A.	Have you begun other lawsuits in state or federal court dealing vinvolved in this action or otherwise relating to your imprisonment	with the same facts nt? YES () NO ()
В.	If your answer to A is YES, describe the lawsuit in the space bel than one lawsuit, describe the additional lawsuits on another pie same outline.)	
	Parties to the previous lawsuit: Plaintiffs:	
	Defendants:	

4		2. COURT: (If federal court, n	ame the district; if state court, name the county):
		3. DOCKET NUMBER:	
		4. Name of Judge to whom cas	e was assigned:
•			Was the case dismissed? Was it appealed? Is it still
		6. Approximate date of filing l	awsuit:
		7. Approximate date of disposi	tion:
II.	PLA	CE OF PRESENT CONFINEMENT:	Sevier County Jail
	A.	Is there a prisoner grievance proced	are in this institution? YES (W) NO (V)
	В.	Did you present the facts relating to YES () NO ()	your complaint in the prisoner grievance procedure
	C.	If your answer is YES,	
			•
	D.	If your answer to B is NO, explain v	thy not 74 becomes of
	Д.	before I go	to the jail
	E.	If there is no prison grievance proce prison authorities? YES () NO (dure in the institution, did you complain to the
	F.	If your answer is YES,	0.00
	,	1. What steps did you take?	Told the Ws

	item A below, please your name in the first blank and place your present address in the ond blank. Do the same for any additional plaintiffs.)
A.	Name of plaintiff: GCOCIEL XCVIER WILLS
	Present address: 137 Commerce St. Sevienile
	Permanent home address: 1124 Oak Cluster dr. Apt. 7 Sev
	Address of nearest relative: 1124 ack Cluster dr. Apt 7. Seviervil
pos	item B below, place the FULL NAME of the defendant in the first blank, his official ition in the second blank, and his place of employment in the third blank. Use item C for additional names, positions, and places of employment of any additional defendants.) Defendant:
	Official position: Sheriff Deputy
	Place of employment: Sevier County Sherriffs office
	Additional defendants: Dexter Robins, Sherriff Dept Senter County Sherriff's Department
C.	33 3 37 113 2 2 2 1 1 3 1 1 2
	ATEMENT OF CLAIM

Was already in handcuffs and
Detained when Officer Dexter
Robins and Johnathan Hays picked
me up off of my feet and
then slammed me on my
face at an angle Causing
my neck to fracture in two
places C5 and C-6. Afterwards
I was trying to tell them
that my neck and right
arm was really hort and to
please grab my left arm and
let go of my right. They ignored
me and your sed me up by
my right com and my feet
and carried me out the
building white hitting my
head of the door ways. I
was taken to the hospital right
after. Incedent is on body currence
tootage.
Witnesses are Jimara Martin
Autmn Allen
Taylor Grace Stephanie Welch
Stephonie Welch

I also have un Daid Medical
Bills Case 3:20-cv-00082-CLC-HBG Document 2 Filed 02/26/20 Page 4 of 5 PageID #: 8

RELIEF
(State BRIEFLY exactly what you want this Court to do for you. Make NO legal arguments.
Cite NO cases or statutes.)
I would like to sue the Sherrift
Departmen for \$3,000,000 (three million
plus Medical exspenses
I (We) hereby certify under penalty of perjury that the above complaint is true to the best of
my (our) information, knowledge and belief.
my (our) information, knowledge and belief.